U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 73.5 - (/	,	2. Fiscal	Year Covered From:			
			9 / 1 / 2	2004 Through:	8 / 11	/ 2005
3. Name and address of person filing.		4. Name	, file number, and add	dress of labor orga	anization.	
Name Joseph p	Cohen	Name	Motion Pictur	re Projectio	onists Loca	l 110 IATSE
		Labor	Organization File Nur	mber 029-152	2	
P.O. Box, Bldg., Room No., if any St	nite 2511	P.O. B	ox, Building and Roo	om Number, if any	'Suite 2511	
Street 230 West Monroe Str	eet	Street	230 West Monr	coe Street		
City Chicago		City	Chicago			
State Idaho	ZIP Code + 4 60606-2818	State	Illinois		ZIP Code + 4	60606-2818
5. Position in labor organization.	retary-Treasurer					
Enter appropriate data below If, dur	ing the past fiscal year, you or your spo (except as specified in the exclu	use or min usions set f	or child directly or inc orth in the instruction	directly had any of	f the following in	terests
A. Held an interest in, engaged in tra monetary value <b>from an employer</b> v	ınsactions (including loans) with, or whose employees your organizati	derived in	come or other econ	nomic benefit of seeking to repre	sent.	
6. Name and address of Employer (inclu	ding trade name, if any).	7.a. Natu	re of Interest, Transa	action, or Income.		MARINE # 2 2 1
Name						
Trade Name, if any:						
P.O. Box, Bldg., Room No., if any						
		7.b. Amo	unt.			· ·
Street						
City						
State	ZIP Code + 4					
		ature				
submitted in this report (including the undersigned's knowledge and belief,	undersigned declares, under penalty of information contained in any accompany rue, correct, and complete. (See the second	ina docum	ents), has been exam	ined by the signat	that all of the info tory and is, to the	ormation best of the
Signed forest P. Co.	Ken	On _	3/11/2005	312-443-10	)11	
			Date	T	elephone Numbe	er

Name of Person Filing Joseph Cohen	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Rittenhouse Asset Management, Inc.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 300  Street 5 Radnor Corporate Center  City Radnor  State Pennsylvania ZIP Code + 4 19087  10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer  11.a. Nature of such dealing.  Rittenhouse is affiliated with Smith Barney, a consultant to the Chicago Moving Picture Machine Operators Union Local 110 of I.A.T.S.E. and M.P.M.O. Severance Trust. In early February 2005 Rittenhouse paid for a dinner attended by Joseph Cohen & others			
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$75  12.a. Nature of interest held or income received.			
	12.b. Amount.			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.			

Name of Person Filing Joseph Cohen		File Number U-	
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## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any	9. Business deals with:
Name TCW Investment Management Co.	a. Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bidg., Room No., if any Suite 1800	b. Trust
Street 865 South Figueroa Street	c. Employer
City Los Angeles	
State California ZIP Code + 4 9001:	7
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	TCW is affiliated with Smith Barney, a consultant to the Chicago Moving Picture Machine Operators
Trade Name, if any:	Union Local 110 of I.A.T.S.E. and M.P.M.O. Severance Trust. In early November 2004 TCW paid for a dinner attended by Joseph Cohen & others
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$75
	12.a. Nature of interest held or income received.
	,
	12.b. Amount.

Name of Person Filing Joseph Cohen	File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Carmell Charone Widmer Mathews & Moss	A Labor Organization		
Trade Name, if any:	a. Labor Organization		
P.O. Box, Bldg., Room No., if any Suite 2500	b. Trust		
Street 230 West Monroe	c. Employer		
City Chicago			
State Illinois ZIP Code + 4 60606-4710			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	The law firm that represents Local 110 gave Joseph Cohen a box of steaks as a Christmas gift in mid-December 2004.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$140		
	12.a. Nature of interest held or income received.		
	12.b. Amount.		